To Health Insurers:

All Dual Eligible Special Needs Plans (D-SNPs) participating in the coordinated care initiative with Idaho Medicaid beginning 1/1/2014 must specify in the contract the categories of Medicaid-eligible individuals they will enroll. This initiative will include only the dual eligibles with full Medicaid benefits.

Dual eligibles with full Medicaid benefits include those in the following Medicaid eligibility categories:

- 1) Qualified Medicare Beneficiaries with full Medicaid benefits,
- 2) Specified Low-Income Medicare Beneficiaries with full Medicaid benefits, and
- 3) Full Benefit Dual Eligibles

1. QMB+...Qualified Medicare Beneficiaries with full Medicaid benefits

A **QMB Plus** is an individual who:

- Is entitled to Medicare Part A
- Has income that does not exceed 100 percent of the Federal Poverty Level (FPL)
- Has resources that do not exceed three times the Supplemental Security Income (SSI) limit, adjusted annually for inflation
- Meets the financial criteria for full Medicaid coverage; and
- Is entitled to all benefits available to a QMB, as well as all benefits available under the State Medicaid plan to a fully eligible Medicaid recipient.

These individuals often qualify for full Medicaid benefits by meeting the Medically Needy standards, or through spending down excess income to the Medically Needy level.

2. SLMB+...Specified Low-Income Medicare Beneficiaries with full Medicaid benefits

A **SLMB Plus** is an individual who:

- Is entitled to Medicare Part A
- Has income that exceeds 100 percent of the FPL, but less than 120 percent of the FPL
- Has resources that do not exceed three times the Supplemental Security Income (SSI) limit, adjusted annually for inflation
- Meets the financial criteria for full Medicaid coverage; and
- Is entitled to payment of Medicare Part B premiums, as well as all benefits available under the State Medicaid plan to a fully eligible Medicaid recipient.

These individuals often qualify for full Medicaid benefits by meeting the Medically Needy standards, or through spending down excess income to the Medically Needy level.

3. FBDE... Full Benefit Dual Eligibles

A **FBDE** is an individual who:

- Is eligible for Medicaid either categorically or through optional coverage groups, such as Medically Needy or special income levels for institutionalized or home and community-based waivers; and
- Does not meet the income or resource criteria for a QMB or an SLMB.

Full Benefit Dual eligibles do NOT include the following Medicaid eligibility categories:

- 1. QMB...Qualified Medicare Beneficiary without other Medicaid (QMB only)
- 2. SLMB...Specified Low-Income Medicare Beneficiary without other Medicaid (SLMB only)
- 3. QI...Qualifying Individual
- 4. QDWI...Qualified Disabled and Working Individual

Additional information on Medicaid coverage of Medicare beneficiaries is available at: https://www.cms.gov/MLNProducts/downloads/Medicare_Beneficiaries_Dual_Eligibles_At_a_Glance. pdf